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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	full name		
		the name that is on	Mariann	
	pictu	government-issued re identification (for nple, your driver's	First name	First name
	licen	se or passport).	Middle name	Middle name
		your picture	Decocinis	
		ification to your ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		ther names you have I in the last 8 years		
		de your married or len names.		
3.	your num Indiv	the last 4 digits of Social Security ber or federal ridual Taxpayer tification number	xxx-xx-2083	

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Case number (if known)

Debtor 1 **Mariann Decocinis**

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 11 Creek View Court Ballston Spa, NY 12020 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Saratoga County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Mariann Decocinis

Par	t 2: Tell the Court About	Your Ban	kruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are			orief description of each, see go to the top of page 1 and			C. § 342(b) for Individ	uals Filing for Bankruptcy
	choosing to file under	☐ Chap	oter 7					
		☐ Chap	oter 11					
		☐ Chap	oter 12					
		■ Chap	oter 13					
8.	How you will pay the fee	al or	out how yo	entire fee when I file my pour may pay. Typically, if you a attorney is submitting your paddress.	are paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
				the fee in installments. If		e this option, sign	and attach the Applica	ation for Individuals to Pay
			•	e in Installments (Official For It my fee be waived (You ma	,	this option only if	you are filing for Char	oter 7. By law, a judge may
		bı ar	ut is not req oplies to you	uired to, waive your fee, and ur family size and you are un on to Have the Chapter 7 Filin	may do so able to pay	o only if your incor y the fee in install	me is less than 150% oments). If you choose	of the official poverty line that this option, you must fill out
9.	Have you filed for bankruptcy within the last 8 years?	□ No. ■ Yes.						
		_ 100.		Northern District of				
			District	New York	When	2/13/14	Case number	1:14-bk-10268
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
11.	Do you rent your	■ No.	Go to I	ine 12.				
	residence?	☐ Yes.	Has yo	our landlord obtained an evict	tion judgm	ent against you ar	nd do you want to stay	in your residence?
				No. Go to line 12.				
				Yes. Fill out <i>Initial Statemer</i> bankruptcy petition.	nt About ar	n Eviction Judgme	ent Against You (Form	101A) and file it with this

Document Page 4 of 53 Case number (if known) Debtor 1 **Mariann Decocinis** Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard?

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Mariann Decocinis

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 53 Case number (if known) Debtor 1 **Mariann Decocinis** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Mariann Decocinis Signature of Debtor 2 **Mariann Decocinis** Signature of Debtor 1 Executed on May 9, 2016 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Mariann Decocinis Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Ronald	J. Kim	Date	May 9, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Ronald J.	Kim		
Printed name			
Law Office	es of Ronald J. Kim, PC		
Firm name			
36 Long A	lley		
Suite 101			
Saratoga S	Springs, NY 12866		
	City, State & ZIP Code		
Contact phone	518-581-8416	Email address	ron@ronaldkimlaw.com
Bar number & St	ate		

		17/7/41111	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Mariann Decocin	is		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK	
Case number				Chook if
(II KIIOWII)				☐ Check if amended

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	11: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	395,161.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	48,577.53
	1c. Copy line 63, Total of all property on Schedule A/B	\$	443,738.53
Par	12: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	279,519.80
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	13,180.00
	Your total liabilities	\$	292,699.80
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,535.01
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,395.28
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nerconal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Mariann Decocinis

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,576.93

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	13,180.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	13,180.00

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Fill ir	this inform	ation to identif	y your case and th				
Debto	or 1	Mariann De	cocinis				
3 - l- 4 -	0	First Name	Middle	e Name	Last Name		
Debto Spous	or ∠ e, if filing)	First Name	Middle	e Name	Last Name		
Jnite	d States Ban	kruptcy Court fo	r the: NORTHER	N DIST	RICT OF NEW YORK		
Case	number						☐ Check if this is an
							amended filing
Offi	cial For	m 106A/I	3				
Scl	hedule	e A/B: P	roperty				12/15
nink it nform	t fits best. Be ation. If more r every questi	as complete and space is needed ion.	accurate as possibl , attach a separate s	le. If two heet to t	t only once. If an asset fits in more than on married people are filing together, both are his form. On the top of any additional page	e equally responsible f	for supplying correct
			_		lence, building, land, or similar property?		
	•	, ,	quitable interest in a	ury resid	rence, bunung, land, or similar property?		
_	No. Go to Part						
• \	Yes. Where is	the property?					
1.1				Wha	t is the property? Check all that apply		
	11 Creek V	iew Court		•	Single-family home	Do not deduct secur	ed claims or exemptions. Put
- ;	Street address, if	available, or other de	escription	_	Duplex or multi-unit building	the amount of any se	ecured claims on Schedule D:
					Condominium or cooperative	Creditors who Have	e Claims Secured by Property.
				_	Manufactured or mobile home		
	Ballston S	pa NY	12020-0000			Current value of the entire property?	e Current value of the portion you own?
_	City	State	ZIP Code		Investment property	\$395,161.0	• •
						Describe the nature	e of your ownership interest
				Who	Other has an interest in the property? Check one	(such as fee simple a life estate), if kno	e, tenancy by the entireties, or
				WIIO	Debtor 1 only		
;	Saratoga				Debtor 2 only		
-	County					☐ Check if this is	s community property
						(see instructions)	71 II 3
					r information you wish to add about this ite erty identification number:	em, such as local	
				One 120	e Family Residence located at 11 20, more particularly described in	that certain Deed	as recorded at
				БОС	ok 1691 Page 513 of the Saratoga	County Clerk's Of	
					your entries from Part 1, including any		\$395,161.00
			rait i. wille that	numbe	er here	=>	
Part 2	Describe Y	our Vehicles					
					nny vehicles, whether they are register Schedule G: Executory Contracts and Un		ny vehicles you own that
. Ca	rs, vans, tru	cks, tractors, s	port utility vehicle	s, moto	orcycles		
	No						
□ \							

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) Document Debtor 1 **Mariann Decocinis** 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... \$3.000.00 Household goods and furnishings. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Normal and necessary consumer electronics \$1.000.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe.....

12. **Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

Normal and necessary clothing

■ No

☐ Yes. Describe.....

page 2

\$2,000.00

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Case number (if known) Document **Mariann Decocinis**

	Non-farm animals Examples: Dogs, cats, bi No	irds, horses		
	Yes. Describe			
ı	No	•	did not already list, including any health aids you did not list	
L	Yes. Give specific info	rmation		
15.			n Part 3, including any entries for pages you have attached	\$6,000.00
Pari	4: Describe Your Financi	ial Assets		
Do	you own or have any le	gal or equitable interest	t in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	ave in your wallet, in your	r home, in a safe deposit box, and on hand when you file your petiti	on
_	,	•	accounts; certificates of deposit; shares in credit unions, brokerage ants with the same institution, list each.	houses, and other similar
_	Yes		Institution name:	
		17.1. Checking	SEFCU	\$3,000.00
—				· · · · · · · · · · · · · · · · · · ·
_		r publicly traded stocks nvestment accounts with	brokerage firms, money market accounts	
	Yes	Institution or issu	uer name:	
_	Non-publicly traded sto joint venture ■ No	ck and interests in inco	orporated and unincorporated businesses, including an interes	st in an LLC, partnership, and
_	_	rmation about them Name of entity:		
20.	Negotiable instruments in	nclude personal checks, o	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	No	mation about them		
	Yes. Give specific infor	Issuer name:		
_	Retirement or pension a Examples: Interests in IR I No		s), 403(b), thrift savings accounts, or other pension or profit-sharing	plans
L	Yes. List each account	separately.		
	- 100. Elot caom account	Type of account:	Institution name:	

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

■ No

Debtor 1

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Case number (if known) Document Debtor 1 **Mariann Decocinis** Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit $\hfill \square$ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement □ No Yes. Give specific information..... **Back child support--Saratoga County Social Services Child Support** \$35,000.00 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information..

Doc 1

Official Form 106A/B Schedule A/B: Property page 4 Case 16-10973-1-rel Doc 1 Filed 05/27/16 Entered 05/27/16 13:07:07 Desc Main Document Page 14 of 53

Deb	otor 1	Mariann Decocinis		Case number (if known)	
_	Example	against third parties, whether or not you have filed a lawes: Accidents, employment disputes, insurance claims, or r		and for payment	
	■ No □ Yes. [Describe each claim			
_	Other co	ontingent and unliquidated claims of every nature, inclu	uding counterclaims	of the debtor and rights to set	off claims
_		Describe each claim			
_		ncial assets you did not already list			
	■ No □ Yes. (Give specific information			
36.		e dollar value of all of your entries from Part 4, includir t 4. Write that number here			\$42,577.53
Part	5: Desc	cribe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	ate in Part 1.	
37. [Oo you ov	vn or have any legal or equitable interest in any business-relat	ed property?		
	No. Go t	o Part 6.			
	Yes. Go	to line 38.			
Part		cribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ı Own or Have an Interes	st In.	
46.	Do you o	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. G	so to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
53.		have other property of any kind you did not already list es: Season tickets, country club membership	?		
_	■ No □ Yes. G	ive specific information			
54.	Add th	e dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8: L	ist the Totals of Each Part of this Form			
55.	Part 1:	Total real estate, line 2			\$395,161.00
56.	Part 2:	Total vehicles, line 5	\$0.00		
57.	Part 3:	Total personal and household items, line 15	\$6,000.00		
58.		Total financial assets, line 36	\$42,577.53		
59.		Total business-related property, line 45	\$0.00		
60.		Total other property not listed line 52	\$0.00		
61.	Part /:	Total other property not listed, line 54 +	\$0.00		
62.	Total p	ersonal property. Add lines 56 through 61	\$48,577.53	Copy personal property total	\$48,577.53
63.	Total o	f all property on Schedule A/B. Add line 55 + line 62			\$443,738.53

Official Form 106A/B Schedule A/B: Property page 5

Fill in this infor	rmation to identify your	case:		
Debtor 1	Mariann Decocin	is		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK	
Case number				
(if known)				☐ Check if this amended fil

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the I	Property	You	Claim a	s Exemp	ıt
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1.	Which set of exemp	ptions are	you claiming?	Check one only	, even if	your spouse is	s filing with	vou.
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- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
11 Creek View Court Ballston Spa, NY 12020 Saratoga County	\$395,161.00		\$137,950.00	NYCPLR § 5206	
One Family Residence located at 11 Creek View Court, Ballston Spa, NY 12020, more particularly described in that certain Deed as recorded at Book 1691 Page 513 of the Saratoga County Clerk's O Line from Schedule A/B: 1.1	l		100% of fair market value, up to any applicable statutory limit		
Household goods and furnishings.	\$3,000.00		\$3,000.00	N.Y. Civ. Prac. Law and Rules § 5205(a)(5)	
Line Horr Schedule AVD. 4.1			100% of fair market value, up to any applicable statutory limit	3 0200(4)(0)	
Normal and necessary consumer electronics	\$1,000.00		\$1,000.00	NYCPLR § 5205(a)(5)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Normal and necessary clothing Line from Schedule A/B: 11.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)	
Line from Goriedaie A/D. 11.1			100% of fair market value, up to any applicable statutory limit		

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Case number (if known)

DC	Manaili Decociiis				<u> </u>	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	IRA: Fidelity Rollover IRA Line from Schedule A/B: 21.1	\$4,577.53		\$11,876.38	Debtor & Creditor Law § 282(2)(e)	
	Line Holli Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	202(2)(0)	
	Child Support: Back child supportSaratoga County Social	\$35,000.00		\$35,000.00	NYCPLR § 5205(d)(3)	
	Services Line from Schedule A/B: 29.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cove No Yes	3 years after that for ca	ases fi	,	,	

		Document Pai	ne 17 of 53		
Fill in this informati	on to identify your	case:			
Debtor 1	Mariann Decocir	nis			
1	First Name	Middle Name Last N	Name	-	
Debtor 2	Circt Name	Middle Name Last N	lama	_	
(Spouse if, filing)	First Name	Middle Name Last N	vame		
United States Bankru	uptcy Court for the:	NORTHERN DISTRICT OF NEW YO	RK	_	
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
00000	000				
Official Form 1					
Schedule D:	Creditors	Who Have Claims Sec	cured by Propert	ty	12/15
Be as complete and ac	curate as possible. If	two married people are filing together, bot	h are equally responsible for s	upplying correct informa	tion. If more space
s needed, copy the Ad		ut, number the entries, and attach it to this			
number (if known).					
. Do any creditors hav	-				
_		is form to the court with your other sched	ules. You have nothing else	to report on this form.	
Yes. Fill in all	of the information b	elow.			
Part 1: List All Se	ecured Claims				
		ore than one secured claim, list the creditor se		Column B	Column C
		a particular claim, list the other creditors in Par al order according to the creditor's name.	t 2. As Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
		ğ	value of collateral.	claim	if any
2.1 Ditech Finan	cial LLC	Describe the property that secures the cla		<u>\$395,161.00</u>	\$0.00
Creditor's Name		11 Creek View Court Ballston Spa	а,		
		NY 12020 Saratoga County	44		
		One Family Residence located at			
		Creek View Court, Ballston Spa,			
		12020, more particularly describe	l .		
		in that certain Deed as recorded a			
PO Box 6172	<u> </u>	Book 1691 Page 513 of the Sarato			
Rapid City, S	SD	As of the date you file, the claim is: Check a apply.	II that		
57709-6172		☐ Contingent			
Number, Street, City	, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage	de or secured		
Debtor 2 only		car loan)	yo o. ooou.ou		
☐ Debtor 1 and Debtor	r 2 only	☐ Statutory lien (such as tax lien, mechanic's	s lien)		
☐ At least one of the d		☐ Judgment lien from a lawsuit	,		
☐ Check if this claim	relates to a	_	Mortgage		
community debt					
Date debt was incurre	d	Last 4 digits of account number	2528		
2.2 Keybank		Describe the property that secures the claim	im: \$7,519.80	\$395,161.00	\$0.00
Creditor's Name		11 Creek View Court Ballston Spa	a,		
		NY 12020 Saratoga County			
		One Family Residence located at			
		Creek View Court, Ballston Spa,			
		12020, more particularly describe			
		in that certain Deed as recorded			
Acct Ending	0627	Book 1691 Page 513 of the Sarato			
4910 Tiedem		As of the date you file, the claim is: Check a apply.	॥ पार्वर		
Brooklyn, Ol	H 44144-2338	Contingent			
Number, Street, City	, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			

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Debtor	1 Mariann Decocinis		Ca	se number (_{if know})	
	First Name Middle N	lame Last Name	_		
_	otor 1 only otor 2 only	☐ An agreement you made (such as car loan)	mortgage or secure	ed	
☐ Deb	otor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)		
☐ At le	east one of the debtors and another	☐ Judgment lien from a lawsuit			
	eck if this claim relates to a mmunity debt	Other (including a right to offset)	allston Spa, N	NY 12020.	
Date de	ebt was incurred	Last 4 digits of account num	ber <u>0627</u>		
	•	Column A on this page. Write that nun		\$279,519.80	
	s is the last page of your form, add that number here:	the dollar value totals from all pages		\$279,519.80	
Part 2	List Others to Be Notified for	or a Debt That You Already Listed	I		
trying t than or	to collect from you for a debt you o	owe to someone else, list the creditor it you listed in Part 1, list the addition	in Part 1, and then	eady listed in Part 1. For example, if a collection agency is list the collection agency here. Similarly, if you have more i you do not have additional persons to be notified for any	
	Name, Number, Street, City, State & Fein, Such & Crane, LLP	Zip Code	On which li	ine in Part 1 did you enter the creditor? 2.1	
	28 East Main Street, Suite Rochester, NY 14614	1800	Last 4 digit	s of account number	
	Name, Number, Street, City, State & Keybank National Associa	•	On which li	ine in Part 1 did you enter the creditor? 2.2	
	100 Bausch & Lomb Place Rochester, NY 14604		Last 4 digit	s of account number	
;	Name, Number, Street, City, State & Saratoga County Supreme		On which li	ine in Part 1 did you enter the creditor? 2.1	
;	Index No 2015789 30 McMaster Street Ballston Spa. NY 12020		Last 4 digit	s of account number	

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n this informa	ation to identify your	case:				
tor 1	Mariann Decocini	is				
	First Name	Middle Name	Last Name		-	
tor 2	First Name	Middle News	Lost Nama		-	
ise if, filing)	First Name	Middle Name	Last Name			
ed States Bank	kruptcy Court for the:	NORTHERN DISTR	RICT OF NEW YORK		_	
e number						
own)					☐ Check	if this is an
					amen	ded filing
oial Farm	106E/E					
cial Form		/ha Haya Hay	soured Claims			12/15
	F: Creditors W		ith PRIORITY claims and	5		
	of Your PRIORITY Un s have priority unsecure					
No. Go to Par	rt 2.					
□ Yes.						
List All on the Do any creditors No. You have	of Your NONPRIORIT s have nonpriority unsect e nothing to report in this p	cured claims against yo		edules.		
List All of Do any creditors No. You have Yes. List all of your nunsecured claim, than one creditor	s have nonpriority unsected to the nothing to report in this periority unsecured classification, list the creditor separately	cured claims against yo eart. Submit this form to the laims in the alphabetica y for each claim. For each	u?	o holds each claim. If a c type of claim it is. Do not li	ist claims already included	I in Part 1. If more
List All of your nunsecured claim,	s have nonpriority unsected to the nothing to report in this periority unsecured classification, list the creditor separately	cured claims against yo eart. Submit this form to the laims in the alphabetica y for each claim. For each	ne court with your other school of the creditor who he claim listed, identify what	o holds each claim. If a c type of claim it is. Do not li	ist claims already included red claims fill out the Cont	I in Part 1. If more
2: List All of oany creditors No. You have Yes. List all of your nunsecured claim, han one creditor Part 2.	s have nonpriority unsected nothing to report in this periority unsecured classifications, list the creditor separately holds a particular claim, list	cured claims against yo part. Submit this form to the laims in the alphabetica y for each claim. For each ist the other creditors in F	ne court with your other school order of the creditor who had a claim listed, identify what Part 3.If you have more than	o holds each claim. If a c type of claim it is. Do not li n three nonpriority unsecur	ist claims already included red claims fill out the Cont	I in Part 1. If more inuation Page of
2: List All of oany creditors No. You have Yes. List all of your nunsecured claim, han one creditor Part 2. Ed Finance	s have nonpriority unsected to the nothing to report in this periority unsecured classification, list the creditor separately	cured claims against yo part. Submit this form to the laims in the alphabetica y for each claim. For each ist the other creditors in F	ne court with your other school of the creditor who he claim listed, identify what	o holds each claim. If a c type of claim it is. Do not li	ist claims already included red claims fill out the Cont	I in Part 1. If more inuation Page of
List All of No. You have Yes. List all of your nunsecured claim, whan one creditor Part 2. Ed Finance Nonpriority Cacct End	s have nonpriority unsected to the nothing to report in this properties to the nonpriority unsecured classification in the creditor separately report in the creditor separately report in the creditor separately report in the creditor is not contact the creditor in this properties in the creditor is not contact the creditor in this properties in the creditor is not contact the creditor in this properties in the creditor is not contact the creditor in this properties in the creditor is not contact the creditor in this properties in the creditor is not contact the creditor in this properties in the creditor is not contact the creditor in the creditor in this properties in the creditor is not contact the creditor in the	cured claims against yo part. Submit this form to the claims in the alphabetica y for each claim. For each ist the other creditors in F	ne court with your other school order of the creditor who had a claim listed, identify what Part 3.If you have more than	o holds each claim. If a c type of claim it is. Do not li n three nonpriority unsecur	ist claims already included red claims fill out the Cont	I in Part 1. If more inuation Page of
List All of your nonsecured claim, than one creditor Part 2. Ed Finant Nonpriority C Acct End 120 N. Se	e nothing to report in this properties to rep	cured claims against yo part. Submit this form to the claims in the alphabetica y for each claim. For each ist the other creditors in F	ne court with your other school of the creditor who had claim listed, identify what are 3. If you have more than digits of account number	o holds each claim. If a c type of claim it is. Do not li n three nonpriority unsecur	ist claims already included red claims fill out the Cont	I in Part 1. If more inuation Page of
List All of your nunsecured claim, han one creditor Part 2. Ed Finant Nonpriority C Acct End 120 N. Se Knoxville	e nothing to report in this period of the nothing to report in this period to the nothing t	cured claims against yo part. Submit this form to the laims in the alphabetica y for each claim. For each list the other creditors in F Last 4 c	ne court with your other school of the creditor who had claim listed, identify what and all you have more than digits of account number was the debt incurred?	o holds each claim. If a c type of claim it is. Do not li n three nonpriority unsecur	ist claims already included red claims fill out the Cont	I in Part 1. If more inuation Page of
List All of oany creditors No. You have Yes. List all of your number and claim, han one creditor Part 2. Ed Finant Nonpriority C Acct End 120 N. Se Knoxville Number Street	e nothing to report in this properties to rep	cured claims against you hart. Submit this form to the laims in the alphabetically for each claim. For each ist the other creditors in Foreact Last 4 control when we have a softh.	ne court with your other school of the creditor who had claim listed, identify what are 3. If you have more than digits of account number	o holds each claim. If a c type of claim it is. Do not li n three nonpriority unsecur	ist claims already included red claims fill out the Cont	I in Part 1. If more inuation Page of
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List All of Do any creditors No. You have Yes. List all of your nunsecured claim, than one creditor Part 2. Ed Finant Nonpriority CAcct End 120 N. Se Knoxville Number Strewho incurred Debtor 1 Debtor 1 Debtor 1 At least cannot reditor and the second strewhole of	e nothing to report in this properties to the nothing to report in this properties to the nothing to report in this properties to the creditor separately report in the creditor's Name ding 4819 reven Oaks Drive report in the creditor's Name report in this properties in the creditor in the cr	cured claims against yo part. Submit this form to the same in the alphabetical years of the care claim. For each claim. For each ist the other creditors in F Last 4 c When we continue the continue t	ne court with your other school of the creditor who had alim listed, identify what Part 3. If you have more than digits of account number was the debt incurred? The date you file, the claim thingent quidated outed	o holds each claim. If a c type of claim it is. Do not li n three nonpriority unsecur 3340 is: Check all that apply	ist claims already included red claims fill out the Cont	I in Part 1. If more inuation Page of
List All of Do any creditors No. You have Yes. List all of your nunsecured claim, than one creditor Part 2. Ed Financian Acct End 120 N. Se Knoxviller Who incurred Who incurred Debtor 1 Debtor 1 Debtor 1 At least of Check if debt	e nothing to report in this proportion of the creditor separately holds a particular claim, list the creditor separately holds a particular claim, list the creditor's Name ding 4819 even Oaks Drive et City State Zlp Code et de debt? Check one. only and Debtor 2 only one of the debtors and and fithis claim is for a committed that the composition of the committed	cured claims against yo part. Submit this form to the same in the alphabetical of the care can claim. For each claim. For each ist the other creditors in F Last 4 continued with the continued con	ne court with your other school of the creditor who had all of the creditor who had all of the claim listed, identify what the claim listed, identify what the claim listed account number was the debt incurred? The date you file, the claim tingent quidated auted account number was the claim listed account number was the debt incurred?	o holds each claim. If a c type of claim it is. Do not lin three nonpriority unsecur 3340 is: Check all that apply	ist claims already included red claims fill out the Cont Tot	I in Part 1. If more inuation Page of
List All of Do any creditors No. You have Yes. List all of your nunsecured claim, than one creditor Part 2. Ed Finan Nonpriority CAcct End 120 N. Se Knoxville Number Stre Who incurre Debtor 1 Debtor 1 At least c Check if debt Is the claim	e nothing to report in this properties to the nothing to report in this properties to the nothing to report in this properties to the creditor separately report in the creditor's Name ding 4819 reven Oaks Drive report in the creditor's Name report in this properties in the creditor in the cr	cured claims against yo part. Submit this form to the same in the alphabetical of the care can be care claim. For each claim. As of the claims against your claim. For each c	ne court with your other school of the creditor who had a claim listed, identify what a cart 3. If you have more than digits of account number was the debt incurred? The date you file, the claim tingent quidated auted NONPRIORITY unsecured lent loans gations arising out of a sepase priority claims	o holds each claim. If a c type of claim it is. Do not lin three nonpriority unsecur 3340 is: Check all that apply d claim:	ist claims already included red claims fill out the Cont Tot	I in Part 1. If more inuation Page of
List All of Do any creditors No. You have Yes. List all of your nunsecured claim, than one creditor Part 2. Ed Finanta Nonpriority Concentration Acct End 120 N. Se Knoxville Number Strewho incurred Debtor 1 Debtor 1 Debtor 1 At least of debt Is the claim No	e nothing to report in this proportion of the creditor separately holds a particular claim, list the creditor separately holds a particular claim, list the creditor's Name ding 4819 even Oaks Drive et City State Zlp Code et de debt? Check one. only and Debtor 2 only one of the debtors and and fithis claim is for a committed that the composition of the committed	cured claims against yo part. Submit this form to the laims in the alphabetica by for each claim. For each list the other creditors in F Last 4 c When w As of the Continuity Obligation of the Continuity Disp	ne court with your other school of the creditor who had claim listed, identify what a real transfer of the creditor who had a claim listed, identify what a real transfer of the claim listed of the claim transfer of the c	o holds each claim. If a c type of claim it is. Do not lin three nonpriority unsecur 3340 is: Check all that apply d claim:	ist claims already included red claims fill out the Cont Tot	I in Part 1. If more inuation Page of
List All of Do any creditors No. You have Yes. List all of your nunsecured claim, than one creditor Part 2. Ed Finan Nonpriority CAcct End 120 N. Se Knoxville Number Stre Who incurre Debtor 1 Debtor 1 At least c Check if debt Is the claim	e nothing to report in this proportion of the creditor separately holds a particular claim, list the creditor separately holds a particular claim, list the creditor's Name ding 4819 even Oaks Drive et City State Zlp Code et de debt? Check one. only and Debtor 2 only one of the debtors and and fithis claim is for a committed that the composition of the committed	cured claims against yo part. Submit this form to the laims in the alphabetica by for each claim. For each list the other creditors in F Last 4 c When w As of the Continuity Obligation of the Continuity Disp	ne court with your other school of the creditor who had a claim listed, identify what a cart 3. If you have more than digits of account number was the debt incurred? The date you file, the claim tingent quidated auted NONPRIORITY unsecured lent loans gations arising out of a sepase priority claims	o holds each claim. If a citype of claim it is. Do not linthree nonpriority unsecur 3340 is: Check all that apply d claim: aration agreement or divoring plans, and other similar	ist claims already included red claims fill out the Cont Tot	I in Part 1. If more inuation Page of

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

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Debtor 1 Mariann Decocinis Case number (if know) **Domestic support obligations** 6a. 6a. 0.00 Total claims Taxes and certain other debts you owe the government 6b. from Part 1 6b. 0.00 6c. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f Student loans 6f. 13,180.00 Total claims from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 6g. you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i. 0.00

6j.

13,180.00

6j.

Total Nonpriority. Add lines 6f through 6i.

		1777	111111111111111111111111111111111111111	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Mariann Decocin	is		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	•				

		Docume	ent Page 22 o	of 53	-
Fill in this	information to identify your	case:			
Debtor 1	Mariann Decocir	nie.			
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK		
Case numl (if known)	ber				☐ Check if this is an
()					Check if this is an amended filing
					ı amended imig
Officia	l Form 106H				
	lule H: Your Cod	lobtore			40/45
Sched	iule n. Toul Cod	ientors			12/15
our name	and case number (if known you have any codebtors? (If). Answer every question			p of any Additional Pages, write
`	,	, , ,	•		
■ No □ Yes	S				
Arizon _	hin the last 8 years, have yo a, California, Idaho, Louisiana				ty states and territories include)
☐ Yes	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt les that apply:
3.1				□ Cohodulo D. lis	
	Name			☐ Schedule D, lir	
				☐ Schedule E/F,☐ Schedule G, lii	
				Scriedule G, III	ne
	Number Street	0	710.0		
	City	State	ZIP Code		
2.0				Пожения в е	
3.2	Name			Schedule D, lir	
	Hamo			☐ Schedule E/F,	
				☐ Schedule G, lii	ne
_	Number Street				
	City	State	ZIP Code		

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Fill	in this information to identify your o	case:							
Del	otor 1 Mariann De	cocinis			_				
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	CT OF NEW YORK						
	se number nown)					☐ A supp	ended filing	wing postpetition cha	apter
0	fficial Form 106I							e following date:	
	chedule I: Your Inc	ome				MIMI / L	OD/ YYYY		12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you che a separate sheet to this form. Describe Employment	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your sith you, do not inclu	spouse de infor	is liv matio	ing with you, on about you	include inf r spouse. If	ormation about you more space is nee	ur eded,
1.	Fill in your employment information.		Debtor 1			Dek	otor 2 or no	n-filing spouse	
	If you have more than one job,	Employment status	■ Employed				Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			□ r	☐ Not employed		
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name	Aztech Technol	ogies I	nc.				
	Occupation may include student or homemaker, if it applies.	Employer's address	5 McCrea Hill Ro Ballston Spa, N		0				
		How long employed t	here?						
Par	Give Details About Mo	nthly Income							
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	eport for	any I	ine, write \$0 i	n the space.	Include your non-fili	ng
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that	person on th	e lines below. If you	need
						For Debtor		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6,250	.01 \$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0	.00 +\$	N/A	

6,250.01

N/A

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Mariann Decocinis	_	Case	number (if known)			
				For	Debtor 1		ebtor 2 or iling spouse	
	Cop	y line 4 here	4.	\$	6,250.01	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,168.48	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$_ \$	0.00	\$	N/A N/A	
	5g.	Union dues	51. 5g.	\$ —	0.00	\$ 	N/A N/A	
	5h.	Other deductions. Specify: PIA VLI	5h.+	\$_		+ \$	N/A	
		PIA Dental		\$	102.44	\$	N/A	
		PIA Medical		\$	372.28	\$	N/A	
		PIA Vision		\$	5.72	\$	N/A	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,715.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,535.01	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8c. 8d. 8e.	\$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$	N/A N/A N/A N/A N/A	
		Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		4,535.01 + \$		N/A = \$ 4,53	35.01
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ-		4,333.01		14/A - 4,5	33.01
11.	Incluothe Do i	te all other regular contributions to the expenses that you list in Schedular decontributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ur depend	,	,	•	hedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certilies					, ,	35.01
13.	Do y	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	m?				Combined monthly inc	ome

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Fill in th	nis information	n to identify yo	our case:			1		
Debtor 1		/ariann Dec				Ch	eck if this is:	
		nariaini Dec	OCIIIIS				An amended filing	
Debtor 2 (Spouse								wing postpetition chapter the following date:
United S	States Bankrupt	cy Court for the	NORTH	ERN DISTRICT OF NEW	YORK		MM / DD / YYYY	
Case nu (If knowr								
Offic	cial Forr	n 106J				•		
		l: Your l	Exper	nses				12/1
Be as o	complete and ation. If more	d accurate as	possible eded, atta	. If two married people a ch another sheet to this				
Part 1:		e Your House	hold					
	this a joint o							
	No. Go to lir Yes. Does I		n a separ	ate household?				
	□ No		·	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.	
2. D o	o you have d	lependents?	□ No					
	o not list Debtebtor 2.	tor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	o not state the							□ No
de	ependents na	mes.			Daughter		13	■ Yes □ No
								☐ Yes
								□ No
								Yes
								□ No
3. D o	o vour exper	nses include	_	Na				☐ Yes
ex	penses of p	eople other the cour dependent	^{han} ⊓	No Yes				
expens	te your expe		our bankr	uptcy filing date unless				apter 13 case to report of the form and fill in the
the val		ssistance an		government assistance cluded it on <i>Schedule I:</i>			Your exp	penses
(0		,						
		nome owners any rent for the		ses for your residence. or lot.	Include first mortgag	e 4.	\$	0.00
I f i	not included	l in line 4:						
4a	a. Real esta	ate taxes				4a.	\$	0.00
4b		, homeowner's				4b.	·	0.00
4c				upkeep expenses		4c.	· -	100.00
4d				dominium dues our residence. such as ho	ome equity loans	4d. 5.	·	0.00 485 28

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Depto	Mariann D	ecocinis	Case num	nber (if known)	
6. L	tilities:				
-		eat, natural gas	6a.	\$	300.00
		er, garbage collection	6b.	·	160.00
6	•	cell phone, Internet, satellite, and cable services	6c.		330.00
_	d. Other. Spec		6d.	·	0.00
-		keeping supplies	7.	· ·	500.00
		ildren's education costs	8.	·	0.00
		, and dry cleaning		\$	0.00
		ducts and services	9. 10.		
	ledical and dent				0.00
		•	11.	Ф	100.00
	ransportation. Ir to not include car	nclude gas, maintenance, bus or train fare.	12.	\$	200.00
		ubs, recreation, newspapers, magazines, and books	13.	·	100.00
		outions and religious donations	14.	· ·	20.00
	nsurance.	outions and religious domations	14.	Ψ	20.00
-		urance deducted from your pay or included in lines 4 or 20.			
	5a. Life insurand		15a.	\$	0.00
	5b. Health insur		15b.		0.00
	5c. Vehicle insu		15c.	· 	100.00
	5d. Other insura		15d.	· ·	0.00
		ude taxes deducted from your pay or included in lines 4 or 20		Ψ	0.00
	pecify:	due taxes deducted from your pay or included in lines 4 or 20	,. 16.	\$	0.00
	nstallment or lea	se navments:		Ψ	0.00
	7a. Car paymen		17a.	\$	0.00
	7b. Car paymen		17b.	· <u> </u>	0.00
	7c. Other. Spec		17c.	*	0.00
	7d. Other Spec	·	17d. 17d.	·	
	•	·		Φ	0.00
		f alimony, maintenance, and support that you did not rep our pay on line 5, <i>Schedule I, Your Income</i> (Official Form		\$	0.00
		ou make to support others who do not live with you.	1001).	\$	0.00
	pecify:	, ou mand to experience and up not me many your	19.	· -	0.00
		ty expenses not included in lines 4 or 5 of this form or or			
	0a. Mortgages o		20a.		0.00
	0b. Real estate		20b.		0.00
		meowner's, or renter's insurance	20c.		0.00
		e, repair, and upkeep expenses	20d.	· ·	0.00
		's association or condominium dues	20d. 20e.	·	
		s association of condominium dues		·	0.00
1. C	ther: Specify:		21.	+\$	0.00
2. C	alculate vour m	onthly expenses			
	2a. Add lines 4 th			\$	2,395.28
		(monthly expenses for Debtor 2), if any, from Official Form 10)6J-2	\$	
			.00 _	I :	2 205 20
	Lo. Aud IIIIE ZZZ č	and 22b. The result is your monthly expenses.		\$	2,395.28
3. C	alculate your me	onthly net income.			
2	3a. Copy line 12	2 (your combined monthly income) from Schedule I.	23a.	\$	4,535.01
		nonthly expenses from line 22c above.	23b.		2,395.28
	.,,	• •			
2	3c. Subtract you	ur monthly expenses from your monthly income.			a 100 ==
		your monthly net income.	23c.	\$	2,139.73
		increase or decrease in your expenses within the year a			
		expect to finish paying for your car loan within the year or do you exporms of your mortgage?	ect your mortgage	payment to incre	ase or decrease because of
_	_	ims or your mortgage:			
	No.				
Г	l Yes E	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Mariann Decocini	c			
Debior 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF NEW YORK		
Case number					
(if known)					☐ Check if this is an
					amended filing
You must file thi	is form whenever you fi	le bankruptcy schedules n connection with a bank		Making a false statement	t, concealing property, or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				sy Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed	l with this declaration and	d
X /s/ Mai	riann Decocinis		x		
	nn Decocinis ure of Debtor 1		Signature of [Debtor 2	
Date	May 9, 2016		Date		

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-:11	in this inform								
		nation to identify you							
Dei	otor 1	Mariann Decocir First Name	Niddle Name	Last Name					
	otor 2	First Name	Middle News	Last Name					
` '	ouse if, filing)	First Name	Middle Name	Last Name					
Uni	ted States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (OF NEW YORK					
	se number					theck if this is an mended filing			
Sta Be a	as complete a	of Financial	attach a separate sheet to	re filing together, both are	ankruptcy equally responsible for sup additional pages, write you				
	<u> </u>	,	rital Status and Where You	Lived Before					
1.	What is you	r current marital statu	ıs?						
	☐ Married ■ Not mar	ried							
2.	During the la	Ouring the last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	·.				
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3. state					ity property state or territory co, Texas, Washington and W				
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Ot	íficial Form 106H).					
Pai	t 2 Explai	n the Sources of You	r Income						
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?			
	□ No ■ Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,961.55	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

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Case number (if known)

Debtor 1 Mariann Decocinis

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last calen anuary 1 to		31, 2015)	■ Wages, commissions, bonuses, tips		\$65,863.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
	r the calen			■ Wages, commissions, bonuses, tips		\$40,821.00	☐ Wages, com bonuses, tips	missions,	
				☐ Operating a business			☐ Operating a	business	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	dless of whetl fit payments; ing a joint ca: the gross inco	e during this year or the two ner that income is taxable. Ex- pensions; rental income; intel se and you have income that y ome from each source separa	amples or rest; divi	of other income are a dends; money collectived together, list it of the collections are a dendered to the collections.	alimony; child supp cted from lawsuits; only once under De	royalties; and ebtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each (befo	ss income from a source are deductions and usions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
6.		Debtor 1's	s or Debtor 2 ebtor 1 nor I	Made Before You Filed for 's debts primarily consume Debtor 2 has primarily consume a personal, family, or househo	r debts' umer de	? bts. Consumer deb	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the	90 days befo	ore you filed for bankruptcy, di	id you pa	ay any creditor a tota	al of \$6,425* or mo	re?	
		□ No.	Go to line 7	7.					
		☐ Yes	paid that con not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 year	nts for do his bank	omestic support obliq ruptcy case.	gations, such as ch	nild support a	nd alimony. Also, do
	■ Yes.			or both have primarily consure you filed for bankruptcy, di			al of \$600 or more?	ı	
		■ No.	Go to line 7	7.					
		☐ Yes	include pay	each creditor to whom you pai /ments for domestic support o r this bankruptcy case.					
	Creditor'	s Name an	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for
7.	Insiders in of which y a business alimony.	clude your ou are an o s you opera	relatives; any fficer, director te as a sole p	bankruptcy, did you make general partners; relatives of person in control, or owner corprietor. 11 U.S.C. § 101. Inc	any ger of 20% c	neral partners; partners or more of their voting	erships of which yo g securities; and ar	u are a gene ny managing	ral partner; corporations agent, including one for
		. ,	nents to an ir						
	Insider's	Name and	Address	Dates of payme	ent	Total amount paid	Amount you still owe	Reason fo	r this payment
Offic	cial Form 107			Statement of Financial Aff	fairs for I				page 2

page 2

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Debtor 1

8.

Page 30 of 53 Document ase number (if known) Mariann Decocinis **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe paid \$0.00 **Carol Foreman** \$1,200.00 1/2016 to 2/2016 **Temporary Loan** Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number GreenTree Servicing, LLC vs. **Foreclosure** Saratoga County Supreme Pending **Mariann Decocinis** Court □ On appeal 2015789 Index No 2015789 ☐ Concluded 30 McMaster Street Ballston Spa, NY 12020 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

П Yes

List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☐ No

Official Form 107

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and

Address:

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Debtor 1 Mariann Decocinis

	Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and	Describe the gifts	Dates you gave the gifts	Value	
	Address: Christina Decoconis 11 Creekview Drive Ballston Spa, NY 12020	Cash	6/2015	\$1,000.00	
	Person's relationship to you: Daughter				
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contrib	y, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?	
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value	
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptcy or gambling? No Yes. Fill in the details.	or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,	
	how the loss occurred Inclu	cribe any insurance coverage for the loss ude the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost	
Par	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or prepa Include any attorneys, bankruptcy petition prepa	did you or anyone else acting on your behalf pay aring a bankruptcy petition? rers, or credit counseling agencies for services require		rty to anyone you	
	Yes. Fill in the details. Person Who Was Paid	Description and value of any property	Date payment	Amount of	
	Address Email or website address Person Who Made the Payment, if Not You	transferred	or transfer was made	payment	
	Law Offices of Ronald J. Kim P.O. Box 318 Saratoga Springs, NY 12866 www.ronaldkimlaw.com	300		\$300.00	
	001 Debtorcc, Inc. 378 Summit Avenue Jersey City, NJ 07306	14.95	April 2016	\$14.95	
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you		or transfer any prope	rty to anyone who	
	■ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment	

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Debtor 1 Mariann Decocinis

8.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread No	usiness or financial affa ade as security (such as t	airs? the granting of a s	, ,	, , ,			
	Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and very property transfer		paymer	e any property or its received or debts exchange	Date transfer was made		
	Person's relationship to you							
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a s	self-settled	trust or similar device of	of which you are a		
	No Yes. Fill in the details.							
	Name of trust	Description and v	alue of the prop	erty transfe	erred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, In	struments. Safe Deposi	t Boxes, and Sto	rage Units				
		, ca.c 20pcc.		.ugo oo				
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred?	y, were any financial ac	counts or instru	ments held	I in your name, or for yo	our benefit, closed,		
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution and	Last 4 digits of	Type of accoun	nt or	Date account was	Last balance		
	Address (Number, Street, City, State and ZIP Code)	account number	instrument	1	closed, sold, moved, or transferred	before closing or transfer		
21.	Do you now have, or did you have within 1 y cash, or other valuables?	year before you filed for	bankruptcy, an	y safe depo	sit box or other deposi	tory for securities,		
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		SS (Number, Street, City,		ne contents	Do you still have it?		
22.	Have you stored property in a storage unit of	or place other than your	home within 1 y	ear before	you filed for bankrupto	y?		
	■ No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe th	ne contents	Do you still have it?		
Par	t 9: Identify Property You Hold or Control	for Someone Fise						
	Do you hold or control any property that so for someone.		ude any property	you borro	wed from, are storing f	or, or hold in trust		
	□ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe th	ne property	Value		
	Christina Decoconis 11 Creekview Drive Ballston Spa. NY 12020	11 Creekview D Ballston Spa, N		-	da AccordLeased ter for Debtor's Use	\$0.00		

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Case number (if known)

Debtor 1 Mariann Decocinis

Part 10:	Give Details	About	Environmental	Information
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For	the purpose of Part 10, the following definitions	apply:							
	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		raste, hazardous substance, toxic	substance,					
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when t	ney occurred.						
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable u	nder or in violation of an environm	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any No Yes. Fill in the details.	release of hazardous material?							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or adminis	strative proceeding under any enviro	nmental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	lature of the case	Status of the case					
Par	t 11: Give Details About Your Business or Con	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have any	of the following connections to an	y business?					
	☐ A sole proprietor or self-employed in a t	rade, profession, or other activity, ei	ther full-time or part-time						
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing execut	ive of a corporation							
	□ An owner of at least 5% of the voting or equity securities of a cornoration								

Business Name

(Number, Street, City, State and ZIP Code)

Address

Describe the nature of the business

Name of accountant or bookkeeper

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Employer Identification number

Dates business existed

Do not include Social Security number or ITIN.

Page 34 of 53 Document ase number (if known) Debtor 1 Mariann Decocinis 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Mariann Decocinis Signature of Debtor 2 **Mariann Decocinis** Signature of Debtor 1 Date May 9, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inforn	Fill in this information to identify your case:						
Debtor 1	Mariann Decocinis						
Debtor 2 (Spouse, if filing)							
United States B	ankruptcy Court for the:	Northern District of New York					
Case number (if known)							

Check	Check as directed in lines 17 and 21:							
According to the calculations required by this Statement:								
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	1: Calculate Your Average Monthly Income								
1.	What is your marital and filing status? Check one of	only.							
	■ Not married. Fill out Column A, lines 2-11.								
	☐ Married. Fill out both Columns A and B, lines 2-11	•							
1 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6- tie 6 months, add the income for all 6 months and divide the toto couses own the same rental property, put the income from that	month per al by 6. Fil	riod would II in the re	d be March sult. Do not	1 throught include	gh Aug e any ii	ust 31. If the amo	ount of your monthly incom ore than once. For examp	ne varied during le, if both
						Colun Debto		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (befor	re all	\$	5,576.93	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	nts from	a spouse	e if	\$	0.00	\$	
4.	All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	t. Include	e regula: depende	r contribut nts, paren	tions nts, not	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1						
	Gross receipts (before all deductions)	\$	0.00						
	Ordinary and necessary operating expenses	-\$	0.00						
	Net monthly income from a business, profession, or fa	rm \$ _	0.00	Copy he	ere -> \$	<u> </u>	0.00	\$	
6.	Net income from rental and other real property	Debtor	1						
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	-\$ _	0.00						
	Net monthly income from rental or other real property	\$	0.00	Copy he	ere -> \$	5	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Mariann Decocinis Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you_____ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 5,576.93 5.576.93 +|\$ each column. Then add the total for Column A to the total for Column B. Total average monthly income **Determine How to Measure Your Deductions from Income** Part 2: 12. Copy your total average monthly income from line 11. 5,576.93 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 5,576.93 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 5,576.93 15a. Copy line 14 here=>____ Multiply line 15a by 12 (the number of months in a year). **x** 12 66,923.16 15b. The result is your current monthly income for the year for this part of the form.

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Debt	or 1	Mariann Decocinis		Case number (if known)		
16	. Cal	culate the median family income that applies to y	you. Follow	hese steps:		
	16a	. Fill in the state in which you live.	NY			
	406					
		Fill in the number of people in your household.	2	ohold	_	62,451.00
	100	 Fill in the median family income for your state and To find a list of applicable median income amounts 	s, go online ι	using the link specified in the separate	\$	02,431.00
4-		instructions for this form. This list may also be avai	ilable at the	bankruptcy clerk's office.		
17		w do the lines compare?	S	and defible form wheel board Discountly		da da uma for a al como da un
	17a			page 1 of this form, check box 1, <i>Disposable li</i> Calculation of Your Disposable Income (Official		
	17b		ulation of Yo	this form, check box 2, Disposable income is cour Disposable Income (Official Form 122C-		
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 13	25(b)(4)		
18.	Cop	by your total average monthly income from line 1	1.		\$	5,576.93
19.	con	duct the marital adjustment if it applies. If you are tend that calculating the commitment period under 1 use's income, copy the amount from line 13.	e married, yo I1 U.S.C. § 1	ur spouse is not filing with you, and you 325(b)(4) allows you to deduct part of your		
	19a	. If the marital adjustment does not apply, fill in 0 on	line 19a.		- \$	0.00
	19b	Subtract line 19a from line 18.			\$	5,576.93
20.	Cal	culate your current monthly income for the year.	. Follow thes	se steps:		
	20a	. Copy line 19b			\$	5,576.93
		Multiply by 12 (the number of months in a year).			х	12
	20b	. The result is your current monthly income for the y	ear for this p	art of the form	\$	66,923.16
	20c	. Copy the median family income for your state and	size of hous	ehold from line 16c	\$	62,451.00
	21.	How do the lines compare?				
		Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	se ordered b	by the court, on the top of page 1 of this form, c	heck box 3, T	he commitment
		■ Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwi	se ordered by the court, on the top of page 1 o	of this form, ch	eck box 4, The
Par	t 4:	Sign Below				
	By s	signing here, under penalty of perjury I declare that t	the informati	on on this statement and in any attachments is	true and corre	ect.
)	(/s/	/ Mariann Decocinis				
Í	M	ariann Decocinis				
	•	gnature of Debtor 1				
	Date	e May 9, 2016 MM / DD / YYYY				
	If yo	ou checked 17a, do NOT fill out or file Form 122C-2.				
	If yo	ou checked 17b, fill out Form 122C-2 and file it with	this form. Or	line 39 of that form, copy your current monthly	y income from	line 14 above.

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Fill in	this info	ormation to	identif	v vour ca	SCO.													
Debto		Mariann			13 C .													
Debto (Spou	r 2 se, if filin	g)							_									
United	l States E	Bankruptcy (Court fo	r the: N	orthern D	istrict of N	New York	k										
Case (if kno	number wn)												Check	f this is	an an	nended	l filing)
	ı Form 1 pter	^{22C-2} 13 Cal	cula	ition (of Yo	ur Di	spos	sable	e In	cor	ne							04/16
		form, you v Period (Office				copy of (Chapter	13 Sta	temer	nt of Y	our Cu	rrent Mo	nthly l	ncome a	and Ca	lculatio	n of	
Be as s	complete is neede	e and accu ed, attach a es, write yo	rate as separa	possible. te sheet	. If two ma	rm, Inclu	de the li											
Part 1	Ca	Iculate You	ır Dedu	ctions fro	om Your I	Income												
the	questio	I Revenue S ns in lines may also I	6-15. To	find the	IRS stan	ndards, go	o online	using										
exp	enses if	expense am they are hig d do not dec	her thar	the stand	dards. Do	not includ	de any o	peratin	g expe	enses	that yo	ı subtrac	ted fror	n incom				
If yo	our exper	nses differ fr	om mor	nth to mor	nth, enter	the avera	ige expe	nse.										
Not	e: Line n	umbers 1-4	are not	used in th	nis form. T	These nun	nbers ap	oply to i	nforma	ation re	equired	by a sim	ilar forr	n used i	n chapt	er 7 cas	ses.	
5.	The nu	mber of pe	ople us	ed in det	ermining	your de	duction	s from	incon	ne								
	plus the	ne number of number of nber of peop	any add	ditional de	ependents										2			
Nat	ional Sta	andards	Y	ou must ı	use the IR	RS Nationa	al Stand	ards to	answe	er the	questio	ns in line	s 6-7.					
6.		clothing, ar rds, fill in the							tered i	in line	5 and t	he IRS N	ational		\$_		1,0	983.00
7.	the doll people	-pocket hea ar amount f who are 65 than this IRS	or out-o or olde	f-pocket h because	nealth care e older pe	e. The nui	mber of a highe	people er IRS a	is spli allowar	t into t nce for	wo cate	goriesp	eople v	vho are	under 6	55 and		

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Document Page 39 of 53 **Mariann Decocinis** Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 108.00 Copy here=> \$ 108.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 130 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 7g. **Total.** Add line 7c and line 7f 108.00 108.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 533.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,372.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Ditech Financial LLC** 2,020.17 Keybank 125.33 Copy Repeat this amount 2,145.50 2,145.50 9b. Total average monthly payment on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=>

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Explain why:

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Mariann Decocinis Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 0.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment Repeat this Conv amount on **Total Average Monthly Payment** 0.00 here => Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this here amount on line Total average monthly payment 0.00 33c. 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 173.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

0.00

not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Mariann Decocinis Case number (if known)

Oth	er Necessary Expenses	In addition to the expertise the following IRS cated		listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, your pay for these taxes	social security taxes, and No. However, if you expect to er from the total monthly an	Medicare taxes receive a tax i	. You may ind refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.	\$	4.72
17			l daduationa the	at valur iah ra	aviras such as ratirament	Ť —	
17.	contributions, union due	s: The total monthly payroles, and uniform costs.	i deductions th	at your job re	quires, such as retirement		
	Do not include amounts	\$	0.00				
18.	Life Insurance: The to filing together, include po not include premium of life insurance other the	\$	0.00				
19.	Court-ordered paymen administrative agency,	\$	0.00				
20	. ,		•		You will list these obligations in line 35.		
20.	as a condition for yo	onthly amount that you pay	for education	that is either	requirea:		
		•				æ	0.00
					ation is available for similar services.	\$	0.00
21.		onthly amount that you pay is for any elementary or sec		-	sitting, daycare, nursery, and preschool.	\$	0.00
22.	Additional health care that is required for the health savings acc	\$	0.00				
	•	urance or health savings a			you pay for telecommunication services	Ψ	
20.	for you and your depen phone service, to the ex income, if it is not reimb Do not include paymen expenses, such as thos	+\$	0.00				
24.	Add all of the expense Add lines 6 through 23.	es allowed under the IRS	expense allow	ances.		\$	1,901.72
Add	litional Expense Deduc				ne Means Test. s listed in lines 6-24.		
25.		bility insurance, and hea	lth savings ac	count expen	uses. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
	Health insurance		\$	0.00			
	Disability insurance		\$	0.20			
	Health savings account		+ \$	0.00	_		
	Total		\$	0.20	Copy total here=>	\$	0.20
	Do you actually spend t	his total amount?					
	_ ′ ′ ′						
	No. How much	do you actually spend?	\$		0		
26.	Continued contribution continue to pay for the syour household or mem	easonable and necessary	old or family make and support of the control of th	ort of an elder e to pay for s	e actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may 129A(b)	\$	0.00
27.	Protection against fan	nily violence. The reasona	bly necessary i	monthly expe	es Act or other federal laws that apply.		
	By law, the court must l	\$	0.00				

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Debtor 1	Mariann Decocinis	Cas	se number (if known)				
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	e and operating exp	penses on			
	If you believe that you have home energy on 8, then fill in the excess amount of home er	osts that are more than the home energy cos ergy costs	ts included in expe	nses on line	е		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must sury.	show that the addit	ional	\$_	0.00	
	Education expenses for dependent child \$160.42* per child) that you pay for your de public elementary or secondary school.	Iren who are younger than 18. The monthly pendent children who are younger than 18 ye	expenses (not morears old to attend a	re than private or			
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must on already accounted for in lines 6-23.	explain why the am	ount			
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or af	ter the date of adju	stment.	\$_	0.00	
		he monthly amount by which your actual food allowances in the IRS National Standards. T s in the IRS National Standards.					
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		е			
	You must show that the additional amount	claimed is reasonable and necessary.			\$_	0.00	
	1. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).						
	Do not include any amount more than 15%	\$_	0.00				
	Add all of the additional expense deductions. Add lines 25 through 31.						
	actions for Debt Payment						
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home 33a through 33e.	mortgages, vehic	le			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually du nkruptcy. Then divide by 60.	e to each secured				
	Mortgages on your home				Avera	ge monthly	
33a.	Copy line 9b here			=>	\$	2,145.50	
	Loans on your first two vehicles						
33b.	•			=>	\$	0.00	
33c.					\$	0.00	
					Ť	0.00	
33d. Name	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt	include	payment e taxes urance?			
				lo			
	-NONE-			'es	\$		
					Φ		
				lo			
			D Y	'es	\$		
				lo			
			_	'es +	\$		
	Total average monthly payment. Add lines	233a through 33d	\$ 2,145.5	Copy total here:		2,145.50	

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ebtor 1	Mari	ann Decocinis			Cas	se nur	mber (if known)			
		debts that you listed in lir property necessary for yo				€,				
I	No.	Go to line 35.								
_ \	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill it	ossession of your propert	n addition to t ty (called the	he payments cure amount).					
Name o	f the	creditor	Identify property that s	ecures the del	ot	Tot	al cure amount		lonthly mount	cure
-NON	E-				\$			÷ 60 = \$		
						$\overline{}$		Сору		
					Total	\$_	0.00	total here=>	. \$	0.00
		we any priority claims - s due as of the filing date o				nat				
		Go to line 36.								
	Yes.	Fill in the total amount of a ongoing priority claims, su	ch as those you listed in	line 19.						
		Total amount of all past-	due priority claims			\$_	0.00	÷ 60	\$	0.00
36. Pro j	ecte	d monthly Chapter 13 pla	n payment			\$_		-		
Office the E To fir	e of Execund a li	nultiplier for your district as the United States Courts (for the Office for United States of district multipliers that inclustructions for this form. This list	or districts in Alabama an s Trustees (for all other oudes your district, go online	d North Carol districts). using the link sp	ina) or by	x _				
Aver	rage	monthly administrative expo	ense			,	\$	Copy tota here=>		
		of the deductions for deb s 33e through 36.	t payment.						\$	2,145.50
Total De	educ	tions from Income								
38. Add	all c	f the allowed deductions								
		e 24, All of the expenses a e allowances		\$	1,901.72	2				
		e 32, All of the additional e			0.20)				
Co	py lin	e 37, All of the deductions	for debt payment		2,145.50)	1			
Tot	حاد احد	ductions		e e	4 047 42	,	Cany total hora-		ሰ	4 047 42

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otor 1 _	Mariann Deco	ocinis		_	Ca	se num	nber (if known)		
rt 2:	Determine Yo	ur Disposable Income Un	ider 11 U.S.C. § 132	25(b)(2)					
		rrent monthly income from Current Monthly Income				•		\$	5,576.93
chile disa rece	Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.				\$	·(0.00		
emp in 11	Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).				t \$		0.00		
12. Tot a	al of all deducti	ons allowed under 11 U.S	s.C. § 707(b)(2)(A).	Copy line 3	88 here =	:> \$	4,047	. 42	
expe their	enses and you h r expenses. You	cial circumstances. If speciave no reasonable alternate must give your case trusted documentation for the expe	ive, describe the speed in a detailed explanate	eciál circu	mstances ar	nd			
Describ	e the special c	ircumstances		Amo	ount of exp	ense			
_				\$			_		
_				_ \$			_		
_				_ \$			_		
			Total	\$	0.00		ppy re=> \$	0.00	
14. Tot a	al adjustments.	Add lines 40 through 43			=>	\$	4,047.42	Copy here=> -\$	4,047.42
5. Cal o	culate your mo	nthly disposable income	under § 1325(b)(2).	Subtract I	ine 44 from	line 3	9.	\$	1,529.51
	Oh and the last								
have time you	ange in income e changed or are your case will be filed your petition	or expenses. If the income evirtually certain to change be open, fill in the information, check 122C-1 in the first I in when the increase occur	after the date you fi on below. For examp column, enter line 2	led your b le, if the w In the sec	ankruptcy p rages report cond columr	etitior ed ind n, exp	n and during the creased after		
Form	Line	Reason for change		Da	ate of change	€	Increase or decrease?	Amount of c	hange
□ 122C	:-1 :-2						☐ Increase ☐ Decrease	\$	

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Debtor 1	Mariann Decocinis	Case number (if known)
Part 4:	Sign Below	
		e that the information on this statement and in any attachments is true and correct.
	/s/ Mariann Decocinis Mariann Decocinis Signature of Debtor 1	
	May 9, 2016 MM / DD / YYYY	

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Debtor 1 Mariann Decocinis Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2015 to 04/30/2016.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Ed Welch Finance Manager

Income by Month:

6 Months Ago:	11/2015	\$5,000.00
5 Months Ago:	12/2015	\$6,250.00
4 Months Ago:	01/2016	\$5,000.00
3 Months Ago:	02/2016	\$5,000.00
2 Months Ago:	03/2016	\$5,000.00
Last Month:	04/2016	\$7,211.55
	Average per month:	\$5.576.93

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-10973-1-rel Doc 1 Filed 05/27/16 Entered 05/27/16 13:07:07 Desc Main Document Page 51 of 53

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of New York

In 1	re	Mariann Decocinis			Case No.				
			De	btor(s)	Chapter	13			
		DISCLOSUR	E OF COMPENSATION	OF ATTORNE	Y FOR DI	EBTOR(S)			
1.	cor	npensation paid to me within on	d Fed. Bankr. P. 2016(b), I certify the year before the filing of the petition (s) in contemplation of or in connection.	on in bankruptcy, or ag	reed to be paid	to me, for services rendered or	to		
		For legal services, I have agre	eed to accept		\$	4,325.00			
		Prior to the filing of this states	ment I have received		\$	300.00			
		Balance Due			\$	4,025.00			
2.	The	e source of the compensation pa	id to me was:						
		■ Debtor □ Other ((specify):						
3.	The	e source of compensation to be p	paid to me is:						
		■ Debtor □ Other ((specify):						
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.								
			ve-disclosed compensation with a per with a list of the names of the peo				1		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
	b. c.	Preparation and filing of any pe	al situation, and rendering advice to etition, schedules, statement of affai- the meeting of creditors and confirm	s and plan which may	be required;				
6.	Ву	This fee does not inclead appeals that may resuccented or subsequed dismissal or otherwise	he above-disclosed fee does not include the following: representatult from the filing of a Bankruptent Chapter 13 Bankruptcy pre reinstate or refile the instantort; title report; property appra	ion in any adversar ccy Petition; any ad oceeding; represen Bankruptcy procee	ial proceedir ditional filing tation to eith eding; and ar	fees; representation in any er revoke a Bankruptcy y costs or fees incurred in			
			CERTIFIC	CATION					
this		ertify that the foregoing is a com kruptcy proceeding.	nplete statement of any agreement of	arrangement for payn	nent to me for r	epresentation of the debtor(s) in			
	Mav	/ 9, 2016	Isl	Ronald J. Kim					
_	Date		Ro	nald J. Kim		_			
				nature of Attorney w Offices of Ronald	I J. Kim. PC				
			36	Long Alley					
				ite 101 ratoga Springs, NY	12866				
			51	8-581-8416 Fax: 51	8-583-9059				
				n@ronaldkimlaw.co	m				
			Na	me of law firm					

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UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF NEW YORK

In re	Mariann Decocinis	,	
	Debtor	Case No.	
Social S	Security No(s). and all Employer's Tax Ident	Chapter ification No(s). [if any]	
	CERTIFICATION	OF MAILING MATRIX	<u>K</u>
	$I_{\text{s}}(\text{we})$, Ronald J. Kim , the attorney for the decreases) hereby certify under the penalties of penalties of penalties of penalties.		
-	ed to and contains the names, addresses and a		•
schedul	es of liabilities/list of creditors/list of equity	security holders, or any am	endment thereto filed herewith
Dated:	May 9, 2016		
		/s/ Ronald J. Kim	
		Ronald J. Kim	titionar
		Attorney for Debtor/Pe (Debtor(s)/Petitioner(s)	

Ditech Financial LLC PO Box 6172 Rapid City, SD 57709-6172

Ed Financial Services Acct Ending 4819 120 N. Seven Oaks Drive Knoxville, TN 37930-6008

Equifax Information Services LLC Acct Ending N/A Po Box 105167 Atlanta, GA 30348

Experian
Acct Ending N/A
PO Box 9701
Allen, TX 75013

Fein, Such & Crane, LLP 28 East Main Street, Suite 1800 Rochester, NY 14614

Keybank Acct Ending 0627 4910 Tiedeman Road Brooklyn, OH 44144-2338

Keybank National Association 100 Bausch & Lomb Place Rochester, NY 14604

Saratoga County Supreme Court Index No 2015789 30 McMaster Street Ballston Spa, NY 12020

TransUnion Consumer Solutions Acct Ending N/A Po Box 2000 Chester, PA 19022-2000